

Fill in this information to identify the case:

Debtor 1 DANIEL G THOMFORDE

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA

Case number 21-10076

Official Form 410S1

Notice of Mortgage Payment Change

12/15

If the debtor's plan provides for payment of postpetition contractual installments on your claim secured by a security interest in the debtor's principal residence, you must use this form to give notice of any changes in the installment payment amount. File this form as a supplement to your proof of claim at least 21 days before the new payment amount is due. See Bankruptcy Rule 3002.1.

Name of creditor: Truist BankCourt claim no. (if known): 7

Last 4 digits of any number you use to
identify the debtor's account:

5 9 6 1

Date of payment change:

Must be at least 21 days after date
of this notice10/07/2023

New total payment:

\$ 1221.71

Principal, interest, and escrow, if any

Part 1: Escrow Account Payment Adjustment**1. Will there be a change in the debtor's escrow account payment?**☒ No

☐ Yes. Attach a copy of the escrow account statement prepared in a form consistent with applicable nonbankruptcy law. Describe the basis for the change. If a statement is not attached, explain why: _____

Current escrow payment: \$ _____

New escrow payment: \$ _____

Part 2: Mortgage Payment Adjustment**2. Will the debtor's principal and interest payment change based on an adjustment to the interest rate on the debtor's variable-rate account?**☒ No

☐ Yes. Attach a copy of the rate change notice prepared in a form consistent with applicable nonbankruptcy law. If a notice is not attached, explain why: _____

Current interest rate: _____%

New interest rate: _____%

Current principal and interest payment: \$ _____

New principal and interest payment: \$ _____

Part 3: Other Payment Change**3. Will there be a change in the debtor's mortgage payment for a reason not listed above?**☐ No

☒ Yes. Attach a copy of any documents describing the basis for the change, such as a repayment plan or loan modification agreement. (Court approval may be required before the payment change can take effect.)

Reason for change: Principal Plus InterestCurrent mortgage payment: \$ 1243.88New mortgage payment: \$ 1221.71

Debtor 1 DANIEL G THOMFORDE Case number (if known) 21-10076
First Name Middle Name Last Name

Part 4: Sign Here

The person completing this Notice must sign it. Sign and print your name and your title, if any, and state your address and telephone number.

Check the appropriate box.

- ☐ I am the creditor.
- ☒ I am the creditor's authorized agent.

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

X /s/Melaney Cremony Date 09/13/2023
Signature

Print: Melaney Cremony Title Bankruptcy Specialist
First Name Middle Name Last Name

Company Truist Bank

Address Bankruptcy Dept, PO Box 85092, 306-40-06-10
Number Street
Richmond VA 23286
City State ZIP Code

Contact phone (800) 635-3112 Email DefaultBankruptcyManagement@Truist.com

CERTIFICATE OF SERVICE

I, Melaney Cremony, do hereby certify that a true and a exact copy of the
foregoing Notice of Mortgage Payment Change was served by United States
mail and/or electronic filing, on 09/13/2023 , addressed as follows:

Debtor:

DANIEL G THOMFORDE
238 CLONMELL UPLAND RD
WEST GROVE, PA 19390-9016

Debtor's Atty:

GARY E THOMPSON
150 E SWEDESFORD ROAD
1ST FLOOR
WAYNE, PA 19087


Trustee:

MILLER WILLIAM C
1234 MARKET STREET
SUITE 1813
PHILADELPHIA, PA 19107

/s/Melaney Cremony
Bankruptcy Specialist for Truist Bank

Home Equity Line of Credit**Loan Questions?
Call 1-844-487-8478**DANIEL G THOMFORDE
DO NOT MAIL - BANKRUPT*****

Page 1 of 1

Account Status		Revolving Option	Total Outstanding Amount												
Statement Date		09/12/23	New Balance \$110,116.47												
Line Account Number			Minimum Payment Due \$20,264.60												
Due Date		10/07/23	Payment Due Date 10/07/23												
Current Amount Due		\$1,221.71	<div>Need help managing your payments?</div> <div>We may have some options to assist you. Please call us today at 1-800-222-1913 to discuss the possibilities.</div>												
Past Due Date		10/07/22													
Past Due Amount		\$12,763.89													
Fees/Charges		\$6,279.00													
Minimum Amount Due		\$20,264.60													
Account Summary			<div>Loans are subject to credit approval. Equal Housing Lender.  Member FDIC</div>												
Credit Limit		\$150,000.00													
Credit Available		\$0.00													
Previous Account Balance		\$109,451.21													
Total Payments ()		\$0.00													
Total Advances (+)		\$0.00	<table><tr><td>Annual Percentage Rate</td><td>Daily Periodic Rate</td><td>Average Daily Balance</td><td>Billing Cycle Days</td><td>Finance Charge</td></tr><tr><td>8.00%</td><td>0.021917%</td><td>\$101,174.37</td><td>30</td><td>\$665.26</td></tr></table>			Annual Percentage Rate	Daily Periodic Rate	Average Daily Balance	Billing Cycle Days	Finance Charge	8.00%	0.021917%	\$101,174.37	30	\$665.26
Annual Percentage Rate	Daily Periodic Rate	Average Daily Balance				Billing Cycle Days	Finance Charge								
8.00%	0.021917%	\$101,174.37				30	\$665.26								
Total Finance Charges (+)		\$665.26													
Total Adjustments (+)		\$0.00													
New Account Balance (=)		\$110,116.47													

Transaction History

Date	Description	Amount	Balance
08/14/23	BEGINNING PRINCIPAL BALANCE	\$0.00	\$101,174.37
09/12/23	TIER 1 CURRENT PER RATE .021917% CORR APR 08.00%		
09/12/23	ENDING PRINCIPAL BALANCE	\$0.00	\$101,174.37

Detach here and mail with your payment in the enclosed envelope. Make check payable to Truist. Be sure to include your loan account number on the check.. Allow 7 days for postal delivery.

- o *Check here if you prefer to have your payment drafted.
*Please provide details on back.

Payment FormCLA
TRUIST ITEM PROCESSING CENTER
PO BOX 580048
CHARLOTTE NC 28258-0048

DANIEL G THOMFORDE

Account Number:

Payment Due Date: 10/07/23**Amount Due: \$20,264.60**

Amount Enclosed \$.

Your ANNUAL PERCENTAGE RATE on page one is based on the Annual Rate plus the margin set forth in your loan documents. The rate will be effective when the new statement cycle begins that month. The daily periodic rate disclosed on page one may vary from statement to statement due to changes in your annual percentage rate.

The TOTAL FINANCE CHARGE on page one is computed by multiplying the "average daily balance" by the daily periodic rate. Multiply this figure by the number of days in the billing cycle to calculate the finance charge for the billing cycle. To determine the "average daily balance" for your account, we take the beginning balance of your account each day and add any new advances and subtract any payments or credits. This gives us the daily balance. Then we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle. This gives us the "average daily balance".

Your NEW ACCOUNT BALANCE on page one does not include the repayment of closing costs paid on your behalf, if applicable, nor any other fees that may result upon closing this account.

Payments made in the branch or mailed to the address on this statement will be credited to your account on the date of receipt. Only checks or money orders should be sent by mail and accompanied by the account number or payment coupon. If the payment is \$5,000 or greater the availability of funds on the line of credit will not be made available until three business days from the receipt of payment.

When you provide a check as payment, you authorize us to use information from your check to make a one-time electronic fund transfer from your account. In certain circumstances, such as for technical or processing reasons, we may process your payment as a check transaction and funds may be processed from your account the same day.

Under the Fair and Accurate Credit Transactions Act, you are eligible for a free copy of your credit report each year. Contact:

Annual Credit Report Request Service P.O. Box 105281 Atlanta, GA 30348-5281 www.annualcreditreport.com 1-877-322-8228

If you notice inaccuracies on your credit report, please write to us at Truist Loan Services, Credit Bureau Disputes, PO Box 849, Wilson, NC 27894.

Convenient Ways To Reach Us

- Visit us online at **Truist.com**.
- Stop by your local Truist branch.
- If you have questions about your loan statement, write to us at:

Truist Loan Services
P.O. Box 2306
Wilson, NC 27894-2306

For information about your line 24 hours a day, call 844-4TRUIST (844-487-8478). Simply follow the prompts and utilize the automated system to access your account, make a payment, or take an advance.

- Enter your Social Security number or Taxpayer Identification number.
- Enter your 14-digit Truist Line Account Number, followed by the pound (#) key.

Billing Rights Summary In case of Errors, Inquiries, or Disputed Items Related to Your Account Statement.

If you think your line of credit statement is wrong, or if you need more information concerning a transaction or if you dispute an amount owed on your statement, please write us on a separate sheet at the following address: Truist Loan Services, P.O. Box 2306, Wilson, NC 27894. We must hear from you no later than 60 days after we sent you the first statement on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights.

In the letter, give us the following information:

- Name and Account Number
- The dollar amount of the suspected error
- A description of the error and why you believe there is an error. If you need more information, please describe the item you are unsure about.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

The bank will not accept any payment marked "Payment in Full" as to a disputed account and reserves the right to reject all such payments. The envelope and any enclosed documents related to a disputed account are to be marked "Attention Disputed Payoff."

Automatic Payment Authorization

Your signature authorizes Truist Bank to automatically debit the checking or savings account listed below for the amount of your loan payment each month. You will be notified by mail when your authorization has been received. Until that time, you are responsible for continuing to make your regular payments. Your authorization will remain in place until a written notice is received from you to cancel automatic payments.

Checking or Savings Account Number to Draft _____ Check One: ☐ Checking ☐ Savings

Financial Institution to Draft _____ Financial Institution's Transit Routing Number _____

Date _____ Signature of Account Holder _____

Include a blank voided check (for checking accounts) or a voided deposit slip (for savings accounts).

Change of address

If you need to change your address, please visit your local Truist branch or call Truist Client Care at 844-4TRUIST (844-487-8478).